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of Transportation

**National Highway
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DYNAMIC SCIENCE, INC.
In-Depth Crash Investigation

Contract DTNH22-94-D-27058
Case DSI-96-AB-09

1997

Technical Report Documentation Page

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15. Supplemental Notes					
16. Abstract <p>This case was initiated in response to a report of air bag-related serious head injuries to a child in the right front passenger seat. This collision occurred in the state of . The weather was clear, but the bituminous roadway was wet at the time of the collision. Vehicle 1, a 1995 Pontiac Grand Prix driven by a 24-year-old female, was traveling eastbound on a 6-lane undivided roadway which first approaches a southbound side street and then an interstate on-ramp. The vehicle was in the lane closest to the right-hand curb and was traveling at a police estimated speed of 32 km/h (20 MPH). A four-year-old male was seated in the right front seat. The driver was wearing her seatbelt according to both the police and the on-board diagnostic module. The four-year-old who is 110 cm (43.3 in.) tall and weighs 18 kg (39.7 lbs.) was wearing the lap portion of the lap and shoulder belt. Restraint use for this occupant was indicated by some slight loading of the belt, a blood drip location consistent with the lap portion being in place, plus an interview with an off duty deputy sheriff who participated in the rescue effort and who stated that the shoulder portion was behind this occupant's back. Additionally, there was physical evidence in the vehicle which places the occupant's right hand near the windshield, presumably attempting to stop himself from going forward. Vehicle 2, a 1990 Ford Bronco driven by a 32-year-old male, was initially stopped facing westbound in the center turn lane, intending to turn left (south) onto the side street. Vehicle 3, a 1996 Saturn SL driven by an 18-year-old male, was stopped on the side street facing north. As Vehicle 1 approached the intersection, traffic in the adjacent two lanes was stopped. There was a break in traffic for those cars west of the intersection and east of the intersection and they allowed Vehicle 2 to begin his left hand turn. The driver of Vehicle 1 indicated that she saw Vehicle 2 enter the lane and braked. As Vehicle 2 entered the southernmost travel lane it was struck in the right front by the left front of Vehicle 1. Both air bags in Vehicle 1 deployed at this time. Vehicle 1 veered slightly to the right and came into contact with Vehicle 3. There was little if any damage related to this impact. Vehicle 2 was pushed in a sharp counterclockwise rotation and came to rest in the intersection facing east. According to the police report, none of the drivers were injured. The right front passenger of Vehicle 1, however, did suffer some serious injuries. The attending physician listed the following injuries: a subdural hematoma, a hemorrhage on the right side of the brain, a fracture to the right humerus, and abrasions to the right side of his forehead. Witnesses indicated that this occupant also sustained contusions/abrasions to the top of the right hand/wrist area, and abrasions/contusions to this occupant's face. The facial and head injuries appear to have come about as a result of contact with the air bag. The right hand and upper arm injuries resulted from the occupant's hand becoming trapped between the module cover and the windshield during deployment. Immediately after the crash, it was determined that the child was not breathing, there was no pulse, and that there was considerable bleeding from her head. CPR was applied by motorists on the scene and the child began breathing. Paramedics arrived shortly thereafter and the child was transported by air to a trauma center where he was listed in critical condition.</p>					
17. Key Words Air bag, deployment, injury, crash, passenger.			18. Distribution Statement		
19. Security Classif. (of this report)	20. Security Classif. (of this page)	21. No of pages	22. Price		

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The crash investigation process is an inexact science which requires that physical evidence such as skid marks, vehicular damage measurements, and occupant contact points be coupled with the investigator's expert knowledge and experience of vehicle dynamics and occupant kinematics in order to determine the pre-crash, crash, and post-crash movements of involved vehicles and occupants.

Because each crash is a unique sequence of events, generalized conclusions cannot be made concerning the crashworthiness performance of the involved vehicle(s) or their safety systems.

DYNAMIC SCIENCE, INC.
CRASH INVESTIGATION
CASE NUMBER: DS9609

TABLE OF CONTENTS

Crash Data	1
Ambience	1
Roadway	2
Vehicles	4
Vehicle Damage	5
Vehicle Velocity Estimates	5
Collision Sequence	6
Pre-crash	6
Crash	6
Post Crash	6
Occupant Kinematics	7
Air bag System	9
Scene Clearance	12
Safety Standards	12
Driver And Other Occupants	13
Injuries	16
Collision Measurements	20
Crash Diagram	21
Photo Index	22

TECHNICAL SUMMARY

CONTRACTOR: Dynamic Science, Inc.
CONTRACT NUMBER: DTNH22-94-D-27058
CASE NUMBER: DSI-96-AB-09

This case was initiated in response to a report of airbag-related serious head injuries to a child in the right front passenger seat.

This collision occurred on _____ 1996 at 1553 hours in the state of _____. The weather was clear, but the bituminous roadway was wet at the time of the collision. There was heavy traffic for the east/west travel lanes.

Vehicle 1, a 1995 Pontiac Grand Prix driven by a 24-year-old female, was traveling eastbound on a 6-lane undivided roadway which first approaches a southbound side street and then an interstate on-ramp. The vehicle was in the lane closest to the right-hand curb and was traveling at a police estimated speed of 32 km/h (20 MPH). A four-year-old male was seated in the right front seat. The driver was wearing her seatbelt according to both the police and the on-board diagnostic module. The four-year-old who is 110 cm (43.3 in.) tall and weighs 18 kg (39.7 lbs.) was wearing the lap portion of the lap and shoulder belt. Restraint use for this occupant was indicated by some slight loading of the belt, a blood drip location consistent with the lap portion being in place, plus an interview with an off duty deputy sheriff who participated in the rescue effort and who stated that the shoulder portion was behind this occupant's back. Additionally, there was physical evidence in the vehicle which places the occupant's right hand near the windshield, presumably attempting to stop himself from going forward. Vehicle 2, a 1990 Ford Bronco driven by a 32-year-old male, was initially stopped facing westbound in the center turn lane, intending to turn left (south) onto the side street. Vehicle 3, a 1996 Saturn SL driven by an 18-year-old male, was stopped on the side street facing north.

As Vehicle 1 approached the intersection, traffic in the adjacent two lanes was stopped. There was a break in traffic for those cars west of the intersection and east of the intersection and they allowed Vehicle 2 to begin his left hand turn. The driver of Vehicle 1 indicated that she saw Vehicle 2 enter the lane and braked. As Vehicle 2 entered the southernmost travel lane it was struck in the right front by the left front of Vehicle 1. Both airbags in Vehicle 1 deployed at this time. The computed delta V was 8 MPH, while the maximum possible delta V was determined to be 13 MPH (based on data from the on-board diagnostic module). Vehicle 1 veered slightly to the right and came into contact with Vehicle 3. There was little if any damage related to this impact. Vehicle 2 was pushed in a sharp counterclockwise rotation and came to rest in the intersection facing east.

According to the police report, none of the drivers were injured. The right front passenger of Vehicle 1, however, did suffer some serious injuries. The attending physician listed the following injuries: a subdural hematoma, a hemorrhage on the right side of the brain, a fracture to the right humerus, and abrasions to the right side of his forehead. Witnesses indicated that this occupant also sustained contusions/abrasions to the top of the right hand/wrist area, and abrasions/contusions to this occupant's face. The facial and head injuries appear to have come

about as a result of contact with the airbag. The right hand and upper arm injuries resulted from the occupant's hand becoming trapped between the module cover and the windshield during deployment.

Immediately after the accident, it was determined that the child was not breathing, there was no pulse, and that there was considerable bleeding from his head. CPR was applied by motorists on the scene and the child began breathing. Paramedics arrived shortly thereafter and the child was transported by air to a trauma center where he was listed in critical condition on the morning of /96. This condition was upgraded to serious as of 1510 hours on /96. On '96, his condition remained serious but his breathing was no longer being assisted. The child was released from the trauma center on /96.

Vehicles 1 and 2 were towed from the scene and placed in secure storage by the local police department.

Crash DATA:

Location:

Area/Type:

Urban

Date/Time:

1996 / 1553 hours

Crash Type:

Vehicle to Vehicle / Front to side

Injury Severity:

Vehicle 1:

Driver not injured
RF occupant, AIS=4

Vehicle 2:

Driver not injured

Vehicle 3:

Driver not injured
RF occupant not injured

AMBIENCE:

Viewing Conditions:

Generally poor. Vehicles 1 and 2 would not be visible to the respective drivers until Vehicle 2 would have pulled into the travel lane.

Cloud Cover:

Light

Precipitation:

None

Temperature:

1550 hours 3° C (37.3° F)

Road Surface:

Wet

ROADWAY:

	VEHICLE 1	VEHICLE 2	VEHICLE 3
Type:	Combination business/ residential	Combination business/ residential	Combination business/ residential
Width:	23.4 M (76.8 ft.)	23.4 M (76.8 ft.)	12.2 M (40 ft.)
Traffic Density:	Heavy	Heavy	Heavy
Median:	None	None	None
Edge:	Raised concrete curb	Raised concrete curb	Raised concrete curb
Surface:	Bituminous	Bituminous	Bituminous
Reported Defects:	None	None	None
Co-efficient of Friction (est.):	0.50	0.50	0.50
Vertical Alignment:	Level	Level	Slight positive
Horizontal Alignment:	Straight	Straight	Straight

Traffic Controls:

	VEHICLE 1	VEHICLE 2	VEHICLE 3
Signals:	None	None	None
Signs:	Freeway on-ramp indicator signs	None	Stop sign
Speed Limit:	64 km/h (40 MPH)	64 km/h (40 MPH)	40 km/h (25 MPH)
Markings:	Bordered on the left by a solid white line and on the right by a raised curb	Bordered on both sides by solid/dotted lines	None

VEHICLES:

	VEHICLE 1	VEHICLE 2	VEHICLE 3
Description:	1995 Pontiac Grand Prix four-door	1990 Ford Bronco 2 door (Eddie Bauer Edition)	1996 Saturn SLI
Odometer:	54,904 km (34,117 miles)	152,277 km (94,623 miles)	Unknown
Engine:	3.1 L V6	5.0 L V8	1.9 L I4
Vehicle Modifications:	None	None applicable	None
Tire Condition:	Good	Good	Unknown
Manual Restraints:	Lap and shoulder 3-pt. single loop seatbelt for LF, Lap and shoulder 3 pt. single loop seatbelt with child cinch retractor for RF/LR/RR, manual lap belt for MR.	Lap and shoulder belts for LF and RF. Lap only for RR/LR/MR.	Unknown
Automatic Restraints:	Supplemental Restraint System (driver's and right front passenger's side air bags)	None	Unknown
Reported Defects:	None	None	None
Cargo:	None	None	Unknown
Windshield Damage:	Damaged by air bag module cover and right arm of passenger.	None	None
Fleet:	NA	NA	NA
Tow Status:	Towed, not due to damage	Towed, not due to damage	Driven from scene

VEHICLE DAMAGE:

	VEHICLE 1	VEHICLE 2	VEHICLE 3
Object Struck:	02	01	01
Event Number:	01	01	02
CDC:	12FYEW1	02RFEW1	09LFLU1 ¹
Maximum Crush:	11 cm (4.3 in.) @ C ₂	Zone 1	No residual deformation

VEHICLE VELOCITY ESTIMATES:

	VEHICLE 1	VEHICLE 2
Impact Speed: (estimated)	32 km/h (20 MPH) ²	8 km/h (5 MPH)
Total Delta V:	13 km/h (8 MPH)	10 km/h (6 MPH)
Longitudinal Delta V:	-13 km/h (-8 MPH)	-3 km/h (-2 MPH)
Lateral Delta V:	1 km/h (0 MPH)	-9 km/h (-6 MPH)
Energy Dissipation:	13381 joules (9868 Ft-Lb)	6610 joules (4874 Ft-Lb)

¹Estimated from police photos

²Police Estimate

COLLISION SEQUENCE:**Pre-Crash:**

Vehicle 1, a 1995 Pontiac Grand Prix driven by a 24-year-old female, was traveling eastbound on a 6-lane undivided roadway which first approaches a southbound side street and then an interstate on-ramp. The vehicle was in the lane closest to the right-hand curb and was traveling at a police estimated speed of 32 km/h (20 MPH). A four-year-old male was seated in the right front seat. Vehicle 2, a 1990 Ford Bronco driven by a 32-year-old male, was initially stopped facing westbound in the center turn lane, intending to turn left (south) onto the side street. Vehicle 3, a 1996 Saturn SL driven by an 18-year-old male, was stopped on the side street facing north.

Crash:

As Vehicle 1 approached the intersection, traffic in the adjacent two lanes was stopped. There was a break in traffic for those cars west of the intersection and east of the intersection and they allowed Vehicle 2 to begin his left hand turn. The driver of Vehicle 1 indicated that she saw Vehicle 2 enter the lane and braked. As Vehicle 2 entered the southernmost travel lane it was struck in the right front by the left front of Vehicle 1. Both airbags in Vehicle 1 deployed at this time. The computed delta V was 8 MPH, while the maximum possible delta V was determined to be 13 MPH (based on data from the on-board diagnostic module).



Figure 1. Vehicle 1, 1995 Pontiac Grand Prix

Post Crash:

Vehicle 1 veered slightly to the right and came into contact with Vehicle 3. There was little if any damage related to this impact. Vehicle 2 was pushed in a sharp counterclockwise rotation and came to rest in the intersection facing east. Vehicles 1 and 2 were towed from the scene and placed in secure storage by the local police department.

Occupant Kinematics:

The driver was wearing her seatbelt according to both the police and the on-board diagnostic module. The four-year-old was wearing the lap portion of the lap and shoulder belt. The lap portion rides approximately 9 cm (3.5 in.) above the seat bottom. The seat was 15.5 cm (6.1 in.) behind the full forward position-all the way back. Prior to the collision, the driver of Vehicle 1 braked. Both the driver and the right front passenger would have initially pitched forward to

some degree--the right front passenger more so since he was not wearing the shoulder portion. The right front passenger rotated over the lap belt and went forward to a sufficient degree that his right hand was above the airbag module. At deployment, the driver engaged the airbag fully and did not sustain any injuries. The right front occupant's right hand was trapped between the airbag module cover and the windshield at deployment. His face was struck by the not-fully-deployed airbag. He was then pushed upward and backward. It is not known where he initially came to rest. There is evidence that the left side of his head was lying on the center console/armrest, but the driver may have pulled him towards her.

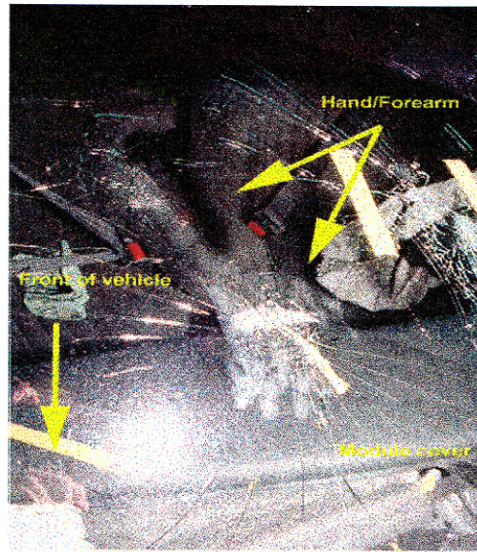


Figure 2. Windshield contact/right hand

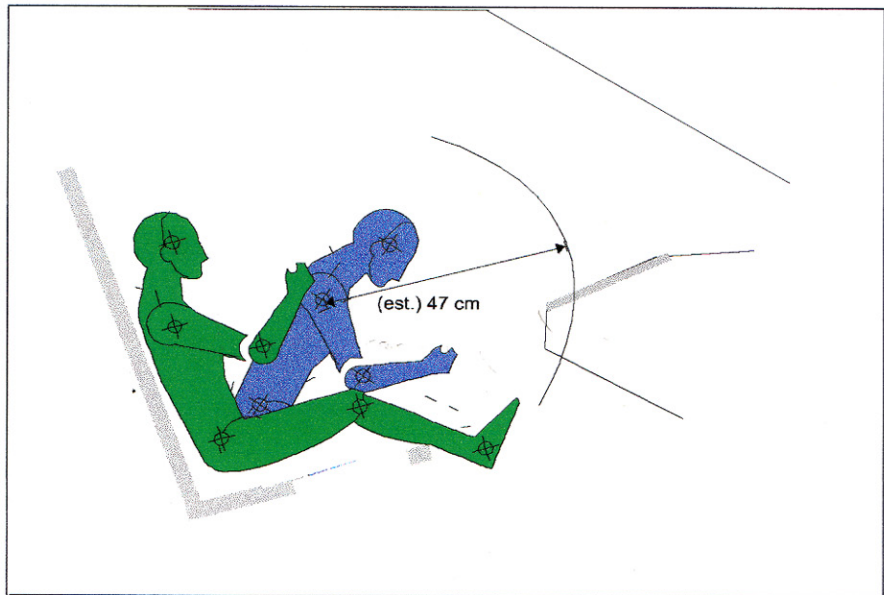


Figure 3. RF Occupant Kinematics

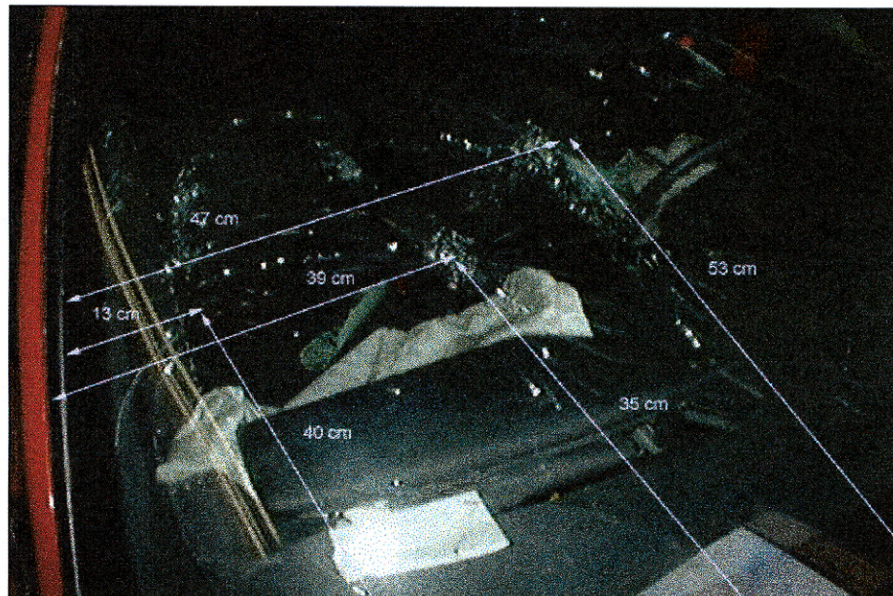


Figure 4. Windshield damage measurements

Air bag System:

Vehicle 1 was equipped with both driver's side and passenger side supplemental restraint systems. Data stored in the Sensing Diagnostic Module (SDM)³ was analyzed and interpreted by General Motors. The SDM recorded and stored a crash event which contained the following information:

- The SIR Warning Light was OFF at the time of the deployment. (No malfunctions).
- The SIR Warning Light was not ON prior to the crash. (No malfunctions).
- There were three SIR system codes stored in memory. (These codes are associated with a normal air bag deployment event).
- The air bags deployed 38.75 milliseconds after the collision was first detected by the SDM.
- The maximum change in velocity (Delta V) the SDM recorded was 13.27 MPH.
- The crash occurred on ignition cycle number 3748. This is eleven (11) cycles prior to when the SDM was read on 11/12/96 (3759).
- This was the first Deployment Crash Event for this vehicle.
- The driver's seat belt was latched at the time the deployment occurred.

The driver's side air bag is 56.5 cm in diameter. The module cover opens using an I-pattern.

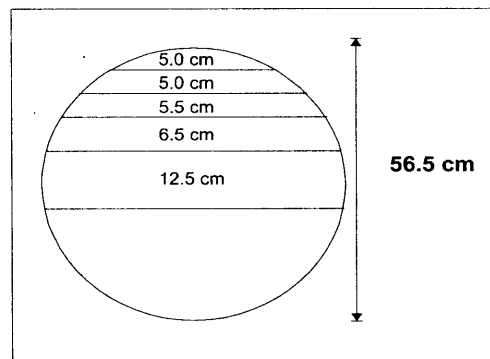


Figure 5. Driver's side air bag

³The SDM is the electrical component of the Supplemental Inflatable Restraint (SIR) system that functions to diagnose and record SIR information.

The right front airbag is 60 cm wide. The module cover is attached to the instrument panel with a nylon strap. At deployment, the module cover will lift up and strike the windshield--as it did in this case. A small metal fragment was found embedded in the fabric of the airbag.



Figure 6. Right front module cover, facing forward

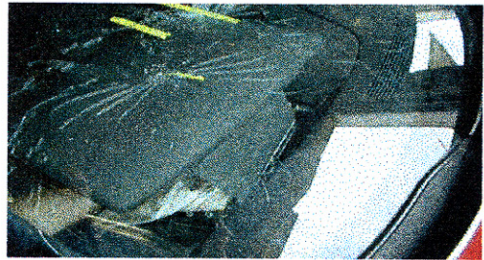


Figure 7. Right front module cover, facing laterally

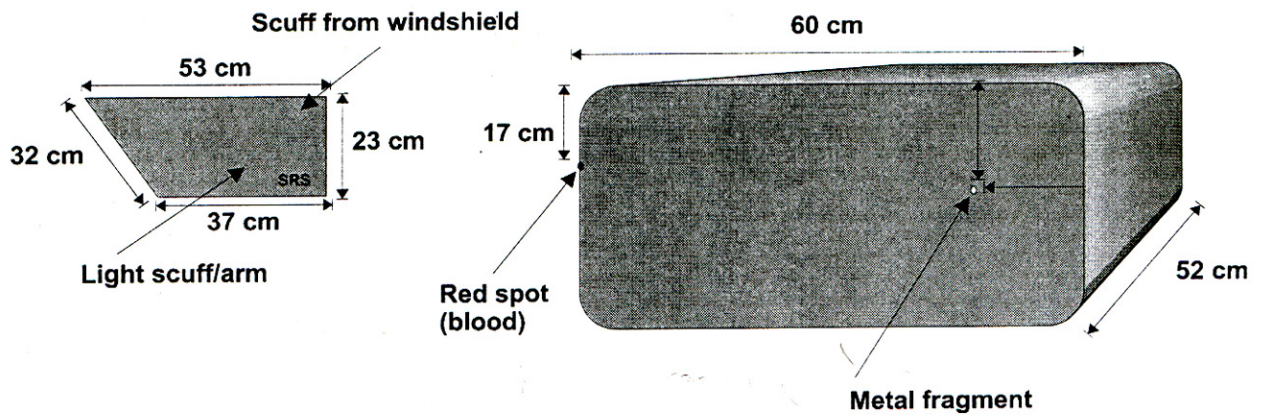


Figure 8. Passenger side airbag and module cover

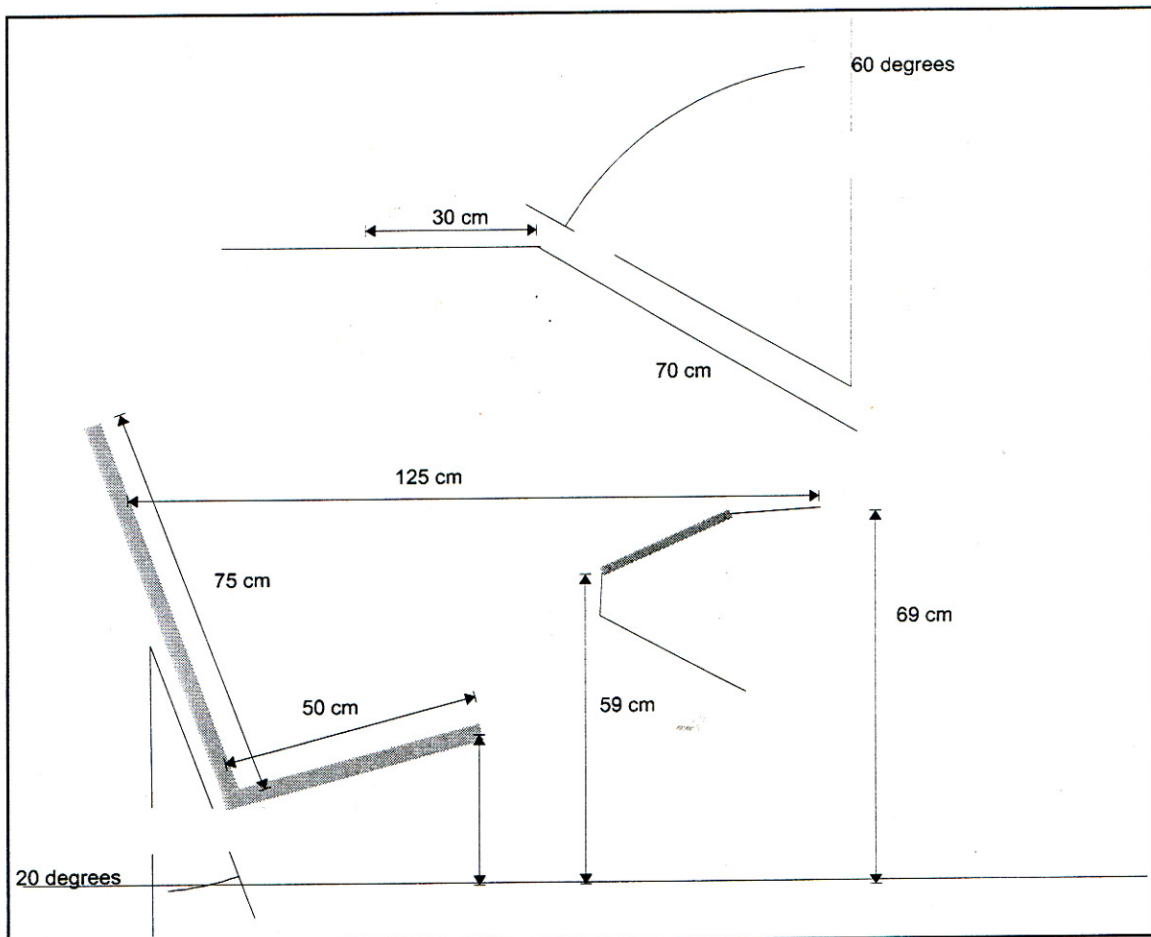


Figure 9. Interior dimensions

Scene Clearance: Immediately after the crash, it was determined that the child was not breathing, there was no pulse, and that there was considerable bleeding from her head. CPR was applied by motorists on the scene and the child began breathing. Paramedics arrived by ground transport shortly thereafter and the child was transported by air to a trauma center where he was listed in critical condition. This was upgraded to serious two days later.

Crash	1553
EMS dispatched	1554
EMS arrived at scene	1554
EMS depart scene	1653 (ground transport)

Safety Standards: There were no violations of Federal Motor Vehicle Safety Standards and Regulations found during the inspection of the case vehicle.

DRIVER AND OTHER OCCUPANTS:**VEHICLE 1**

	DRIVER	OCCUPANT 2
Age/Sex:	24/Female	4/Male
Seated Position:	Left front	Right front
Seat Type:	Bucket	Bucket
Height:	Unknown	110 cm (43 in.)
Weight:	Unknown	18 kg (39.7 lbs.)
Occupation:	Unknown	NA
Pre-existing Medical Condition:	Unknown	None known
Alcohol/Drug Involvement:	None	None
Driving Experience:	8 years	NA
Body Posture:	Unknown	Unknown
Hand Position:	Unknown	Unknown
Foot Position:	Right foot on brake, left presumably on floorboard	Unknown
Restraint Usage:	Lap and shoulder belts used. Usage confirmed during field inspection and information provided from on-board diagnostic module	Lap only used. Usage determined by field inspection which show a small amount of loading, a drop of blood on the outward facing part of the engaged lap belt, and interviews with on-scene witnesses.

DRIVER AND OTHER OCCUPANTS (con't):**VEHICLE 2****DRIVER**

Age/Sex:	32/Male
Seated Position:	Left front
Seat Type:	Bucket with folding back
Height:	Unknown
Weight:	Unknown
Occupation:	Unknown
Pre-existing Medical Condition:	Unknown
Alcohol Involvement:	None
Driving Experience:	14 years
Body Posture:	Unknown
Hand Position:	Unknown
Foot Position:	Right foot on accelerator, left presumably on floor
Restraint Usage:	Lap and shoulder used
Additional Occupants:	None

DRIVER AND OTHER OCCUPANTS (con't):**VEHICLE 3**

	DRIVER	OCCUPANT 2
Age/Sex:	18/Male	18/Female
Seated Position:	Left front	Right front
Seat Type:	Bucket with folding back	Bucket with folding back
Height:	Unknown	Unknown
Weight:	Unknown	Unknown
Occupation:	Unknown	Unknown
Pre-existing Medical Condition:	Unknown	Unknown
Alcohol Involvement:	None	None
Driving Experience:	2 years	NA
Body Posture:	Normal, upright	Normal, upright
Hand Position:	Both on wheel	NA
Foot Position:	Right foot on brake	NA
Restraint Usage:	Lap and shoulder used	Lap and shoulder used
Additional Occupants:	One	None

INJURIES:**Vehicle 1**

	INJURY	OIC CODE	ICD-9	SOURCE, confidence level⁴
DRIVER:	No reported injuries			
R/F OCCUPANT:				
	Subdural hematoma (possibly left side)	140629.4,2	853.0	Airbag, 2
	Intraparietal hemorrhage (possibly right side)	140629.4,1	852.2	Airbag, 2
	Fracture right humerus	752600.2,1	733.11	Module cover, 2
	Forehead abrasion, right	290202.1,7	910.0	Airbag, 1
	Forehead contusion	290402.1,7	920.0	Airbag, 1
	Contusion, right wrist/hand	790402.1,1	923.2	Windshield, 1
	Abrasion, right wrist/hand	790202.1,1	913.0	Windshield, 1
	Abrasions about right eye	297202.1,1	910.0	Airbag, 1
	Abrasions about left eye	297202.1,2	910.0	Airbag, 1
	Abrasion, mouth	290202.1,8	910.0	Airbag, 1
	Abrasion, nose	290202.1,4	910.0	Airbag, 1

⁴1=Certain, 2=Probable, 3=Possible, 4=Unknown

INJURIES:

Vehicle 2

DRIVER: No reported injuries

Vehicle 3

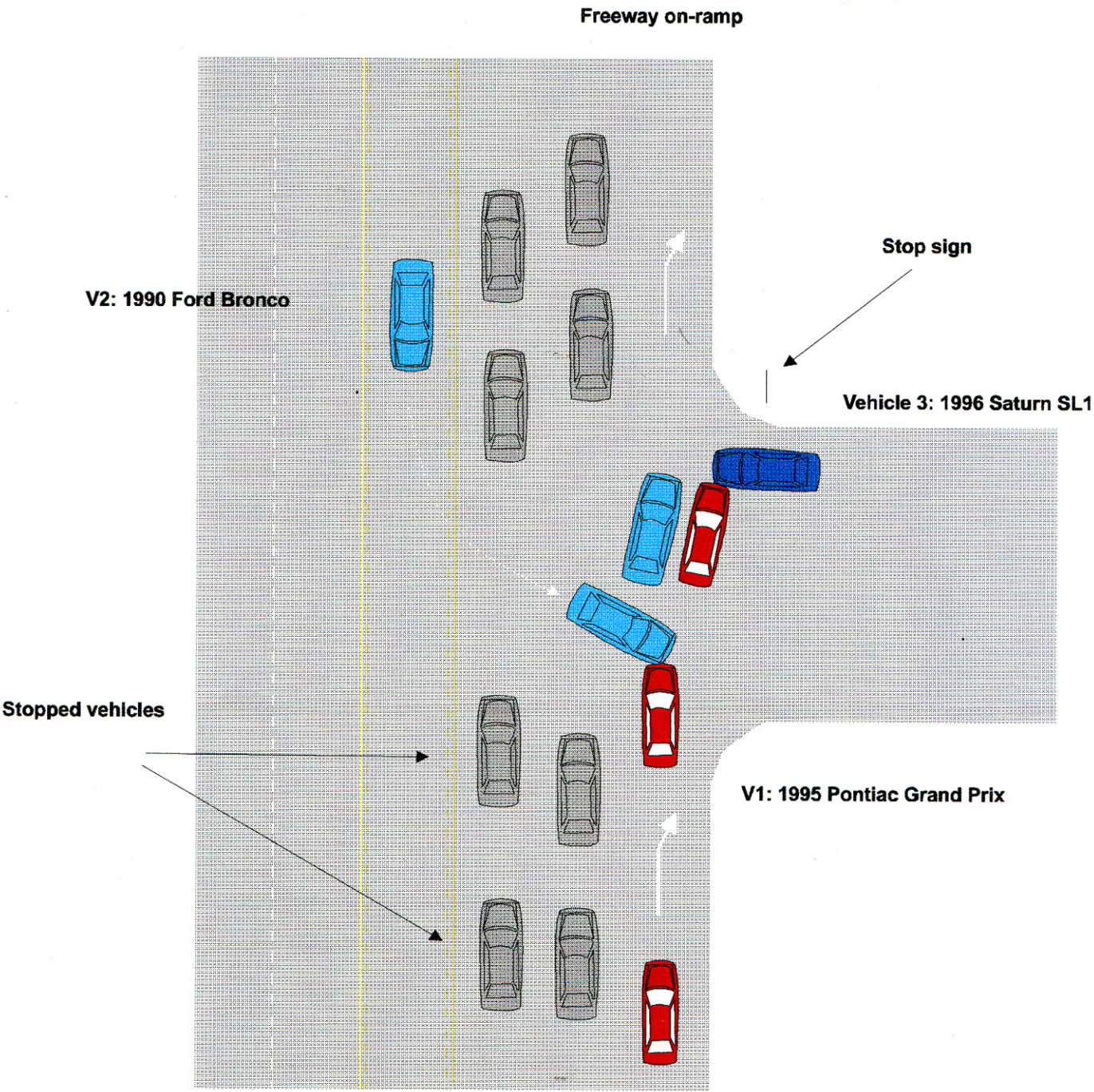
DRIVER: No reported injuries

R/F No reported injuries
OCCUPANT:

Abbreviations Used In Scene And Photographic Documentation

ft	Feet
in	Inches
AIS	Abbreviated Injury Scale
BLF	Begin Left Front
BLR	Begin Left Rear
BRF	Begin Right Front
BRR	Begin Right Rear
CCW	Counterclockwise
CDC	Collision Deformation Classification
CG	Center of Gravity
CM	Centimeter
COE	Cab Over Engine
CW	Clockwise
E, EB	East, Eastbound
ELF	End Left Front
ELR	End Left Rear
ERF	End Right Front
ERR	End Right Rear
FRP	Final Rest Position
I	Interstate Highway
KG	Kilogram
KPH	Kilometers Per Hour
LF	Left Front
LR	Left Rear
M	Meter
N, NB	North, Northbound
NE	Northeast
NW	Northwest
PDOF	Principal Direction of Force
POI	Point of Impact
R	Radius of Curvature
RF	Right Front
RL	Reference Line
RP	Reference Point
RR	Right Rear
S, SB	South, Southbound
SE	Southeast
SW	Southwest
T	Time or Elapsed Time (in seconds)
U.S.	United States Highway
V1	Vehicle Number 1
W, WB	West, Westbound

ACCIDENT DIAGRAM



Case Number: DSI-96-AB-09

COLLISION MEASUREMENTS

Case Number DSI-96-AB-09

Reference Point: West road edge

Reference Line: North road edge

DATA POINT	LONGITUDINALS	LATERALS
Lane 1 (right turn)	0	4.26 M (14 ft.) NRL
Lane 2	0	7.8 M (25.6 ft.) NRL
Lane 3	0	11.3 M (38.2 ft.) NRL
Lane 4	0	16.09 M (52.8 ft.) NRL
Lane 5	0	19.9 M (65.3 ft.) NRL
Lane 6	0	23.4 M (76.8 ft.) NRL
Northbound roadway	12.19 M (40 ft.) ERP	0
Final rest V1		
LF	(1 ft.) NRP	(30 ft.) ERL
LR	(4 ft.) NRP	(21 ft.) ERL
Final rest V2		
LF	(9.6 ft.) NRP	(33 ft.) ERL
LR	(13.6 ft.) NRP	(25.5 ft.) ERL
Final rest V3		
LF	(3.6 ft.) SRP	(32 ft.) ERL
LR	(12 ft.) SRP	(31 ft.) ERL

PHOTO INDEX

Case No. DSI-96-AB-09

PHOTO NO.	VEHICLE NO.	DIRECTION OF PICTURE	SUBJECT MATTER
1-2	1	East	Approach to area of impact.
3	1	East	Area of impact.
4-5	2	West	Approach to area of impact.
6	2	SW	Area of impact.
7	3	North	Approach to area of impact.
8	3	North	Area of impact.
9-19	1-3	-	Police photos showing final rest for all vehicles, as well as rescue activities. Photos 13/17 show contact between Vehicles 1 and 3.
20-39	1	CCW	Exterior of vehicle. Photos 36-39 show damage to windshield. Photo 39 shows imprint of passenger's hand/wrist against the windshield.
40-74	1	NA	Interior of vehicle. Photo 45 shows scuff on module cover. Photos 48-51 show blood drip pattern on center console. Photo 54 shows height of lap portion of right front seatbelt relative to the seat itself. Photos 68-71 show impression to roof surface. Photos 72-73 show metal fragment found in airbag material.
75-77	1	NA	Views of down jacket worn by right front occupant.
78-88	2	CW	Exterior of vehicle.
89-94	2	NA	Interior of vehicle.









AB09-007



AB09-008



AB09-011



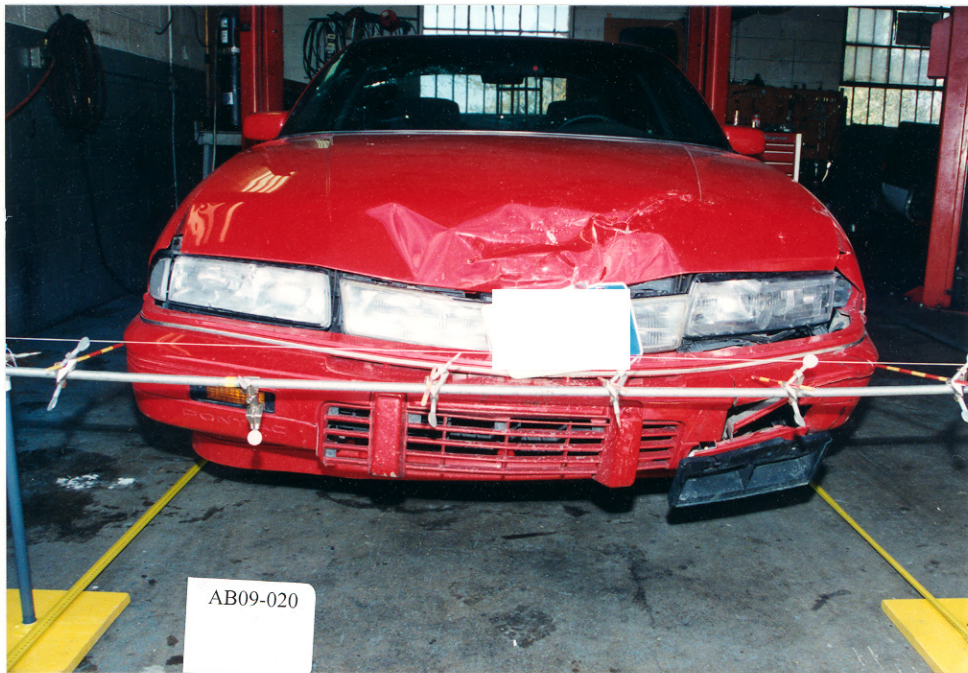
AB09-012









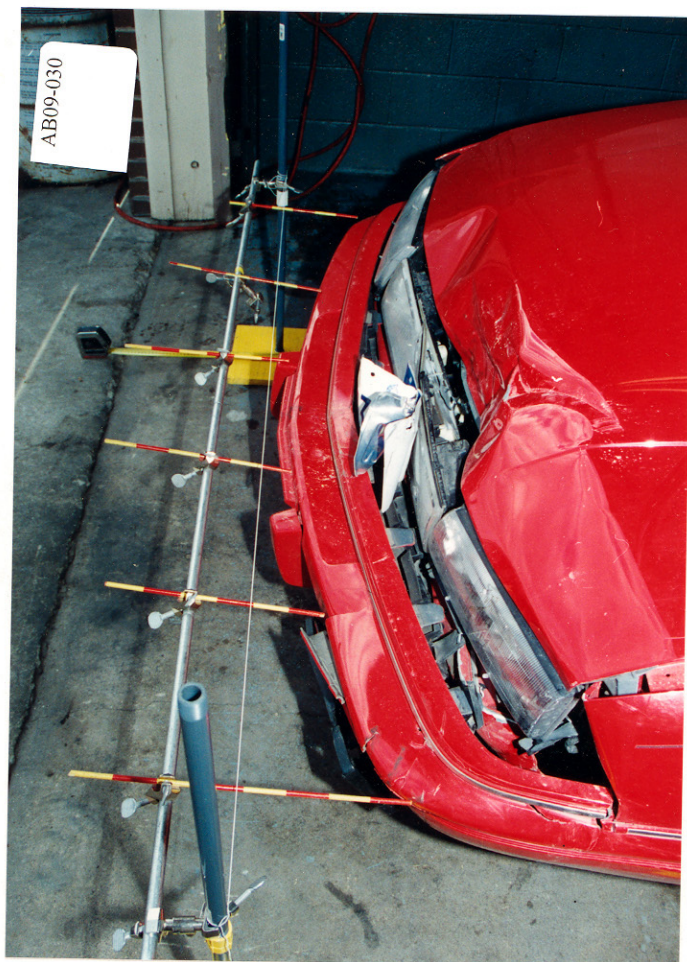




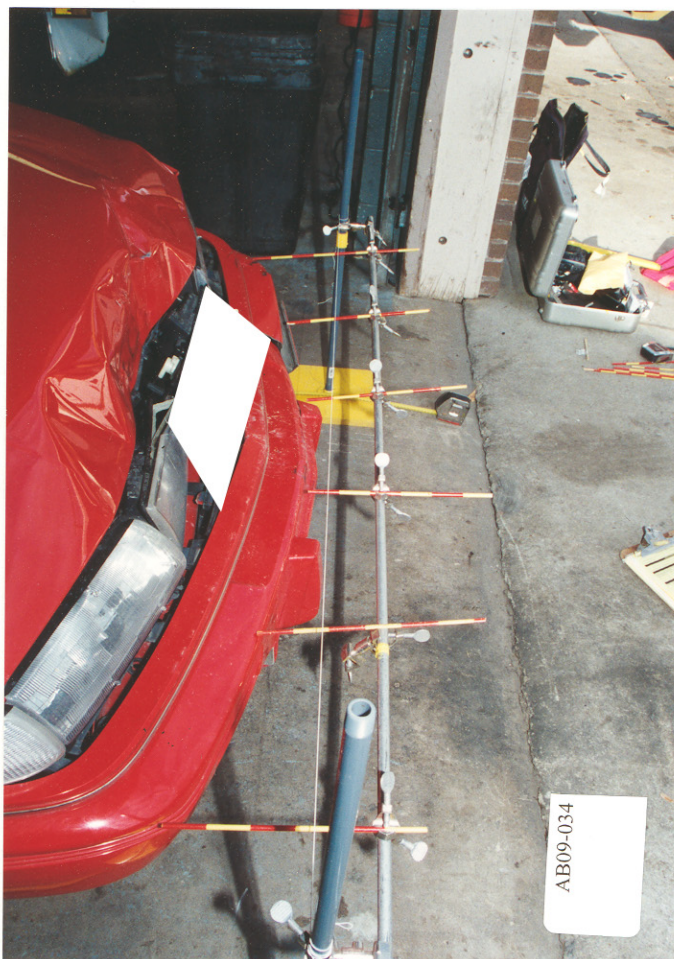


























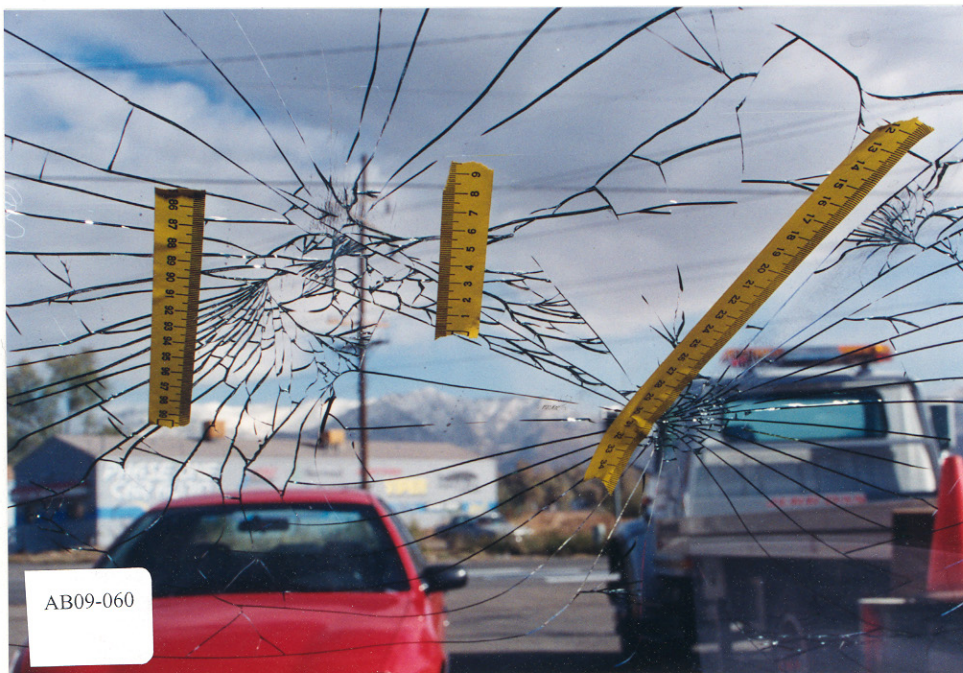
















































TIME	MONTH DAY YEAR			DAY OF WEEK		<div style="display: flex; justify-content: space-between;"> <div>1 2 3 4 5 6 7</div> <div>M T W T F S S</div> </div>							MILITARY TIME		CASE NUMBER		15
													BEST AVAILABLE		02		
LOCATION	PLACE WHERE ACCIDENT OCCURRED: COUNTY <u>11</u> CITY OR TOWN <u></u>														FOR AGENCY USE		2
	Accident was outside city limits indicate distance from city limits or nearest town <u></u> MILES <input type="checkbox"/> NORTH <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W of <u></u> CITY OR TOWN														D.I.D. USE ONLY		2
	ROAD ON WHICH ACCIDENT OCCURRED: <u></u> RAMP NO. <u></u>														STATE/LOCAL		19
	GIVE NAME OF STREET OR HIGHWAY NUMBER INTERSECTION TYPE <u></u>																02
	1. AT ITS INTERSECTION WITH <u></u> 2. IF NOT AT INTERSECTION <u></u> NORTH <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W of <u></u> FEET <input type="checkbox"/> NORTH <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W OF MILE POST <u></u> NEAREST INTERSECTION, STREET, HOUSE NO. LANDMARK BE SURE TO COMPLETE IF ROAD HAS MILE POST																20
TENTH OF A MILE <u></u>																21	
VEHICLE #		YEAR	MAKE	MODEL	BODY STYLE/TYPE CODE	VEHICLE COLOR	G.V.W.R.	DESC. OF CARGO CODE	COMMERCIAL VEHICLE (Reg 12,000 lbs. or more)				22				
1		90	Ford	Bronco	07	Blue			INTERSTATE <input type="checkbox"/> INTRASTATE <input type="checkbox"/>				23				
VEHICLE IDENTIFICATION NUMBER					DISPOSITION OF VEHICLE			NO. OF AXLES (including all trailers)		DIR OF TRAVEL		24					
					CODE 1			2		South		5					
US DOT		LICENSE PLATE INFO	YEAR	MONTH	STATE	NUMBER	PARTS DAMAGED	COST OF REPAIR				25					
ICC MC			97	6			3	1000.00				5					
OWNER	FIRST	INITIAL	LAST			STREET, CITY, STATE, ZIP, PHONE NO.				PHONE ()		26					
OPERATOR												04					
CARRIER												26					
DRIVER	FIRST	INITIAL	LAST			STREET, CITY, STATE, ZIP, PHONE NO.				PHONE ()		27					
DRIVER	Same											01					
DRIVER'S LICENSE	STATE NUMBER		DATE OF BIRTH		MONTH	DAY	YEAR	AGE	SEX	SAFETY EQUIP TYPE	INJURY CAUSE	THROUGH WHAT AREA EJECTED?	28				
1													10				
DRIVER'S EDUCATION	1. PUBLIC 3. NONE 2. COM'L 4. UNKN		YEARS DRIVE EXP.	LICENSE CLASS	ENDORSEMENT	RESTRICTIONS							29				
1			14	A	TM	A							10				
INSURANCE COMPANY			EFFECTIVE DATE		EXPIRATION DATE		POLICY NUMBER						30				
													10				
INSURANCE APPEARS VALID		AGENCY THAT SOLD POLICY			ADDRESS			PHONE ()					31				
YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>													2				
VEHICLE #	YEAR	MAKE	MODEL	BODY STYLE/TYPE CODE	VEHICLE COLOR	G.V.W.R.	DESC. OF CARGO CODE	COMMERCIAL VEHICLE (Reg 12,000 lbs. or more)				32					
2	95	Pontiac	Grand Prix	05	Red			INTERSTATE <input type="checkbox"/> INTRASTATE <input type="checkbox"/>				1					
VEHICLE IDENTIFICATION NUMBER					DISPOSITION OF VEHICLE			NO. OF AXLES (including all trailers)		DIR OF TRAVEL		33					
					CODE 1			2		East		1					
US DOT		LICENSE PLATE INFO	YEAR	MONTH	STATE	NUMBER	PARTS DAMAGED	COST OF REPAIR				34					
ICC MC			97	7			1.32	5000.00				1					
OWNER	FIRST	INITIAL	LAST			STREET, CITY, STATE, ZIP, PHONE NO.				PHONE ()		35					
OPERATOR												35					
CARRIER												36					
DRIVER	FIRST	INITIAL	LAST			STREET, CITY, STATE, ZIP, PHONE NO.				PHONE ()		37					
DRIVER												37					
DRIVER'S LICENSE	STATE NUMBER		DATE OF BIRTH		MONTH	DAY	YEAR	AGE	SEX	SAFETY EQUIP TYPE	INJURY CAUSE	THROUGH WHAT AREA EJECTED?	38				
1													1				
DRIVER'S EDUCATION	1. PUBLIC 3. NONE 2. COM'L 4. UNKN		YEARS DRIVE EXP.	LICENSE CLASS	ENDORSEMENT	RESTRICTIONS							39				
1			08										1				
INSURANCE COMPANY			EFFECTIVE DATE		EXPIRATION DATE		POLICY NUMBER						40				
													1				
INSURANCE APPEARS VALID		AGENCY THAT SOLD POLICY			ADDRESS			PHONE ()					41				
YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>													1				
1. PEDESTRIAN		2. BICYCLIST		DATE OF BIRTH			AGE		SEX	INJURY TYPE CAUSE AREA		42					
												1					
NAME				ADDRESS								43					
												1					
												1					

ORIGINAL REPORT

SUPPLEMENTAL REPORT

AMENDED REPORT

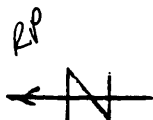


DIAGRAM BY

	EAST OF RL1	NO/SO OF RL2
a-LEFT FRONT TIRE VEH 1	33°	9° N
b-LEFT REAR TIRE VEH 1	25°	13° N
c-LEFT FRONT TIRE VEH 2	30°	1° N
d-LEFT REAR TIRE VEH 2	21°	4° N
e-LEFT FRONT TIRE VEH 3	32°	3° S
f-LEFT REAR TIRE VEH 3	31°	12° S

RL1 IS WEST CURB OF
RL2 IS SOUTH CURB OF

VEHICLE 1: BLUE FORD BRONCO
VEHICLE 2: RED PONTIAC GRAND PRIX
VEHICLE 3: GREEN SATURN

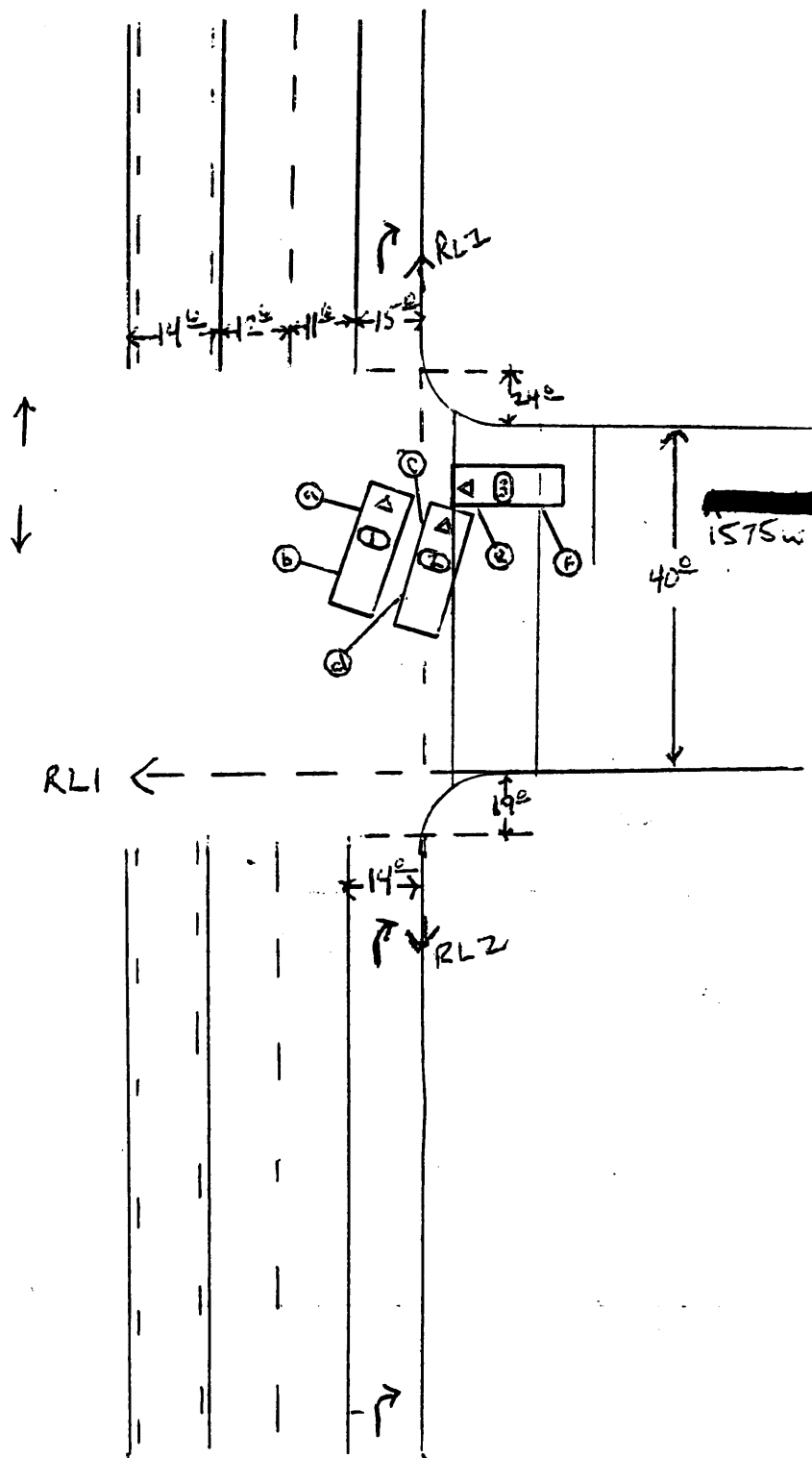


DIAGRAM WHAT HAPPENED BELOW.

CASE NUMBER _____

BEST AVAILABLE

Reason For No Diagram _____

INDICATE DIRECTION OF NORTH

VEHICLE NO. _____ NO. _____

1 Officer not at scene

Vehicles moved _____

Other _____

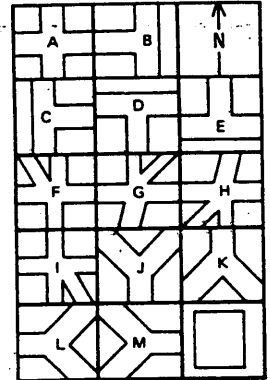


ESTIMATED TRAVEL SPEED

ESTIMATED IMPACT SPEED

POSTED SPEED

ADVISORY SPEED



INDICATE INTERSECTION TYPE

DESCRIBE WHAT HAPPENED
(Refer to Vehicle by Number)

This R/O contacted the driver of Veh #2 who stated that she was proceeding east bound on _____ at _____ when a Ford Bronco suddenly appeared in front of her as it was turning left from west bound _____ on to _____ for south bound. The driver of Veh #2 stated that traffic was backed up and stopped in the east bound through lanes - thus blocking her view of Veh #1 until that vehicle was blocking her lane. R/O photographed the intersection from several angles and also both vehicles were photographed. It is clear that Veh #2 had the right of way and that Veh #1 failed to yield right of way to Veh #2 while turning left. R/O will seek a complaint via the city attorney against the driver of Veh #1.

If Hazardous Materials were involved list the placard number from off the commercial vehicle:

DAMAGE TO PROPERTY OTHER THAN VEHICLES

Name object and state nature and amount of damage

ESTIMATE

Name and address of owner of object struck

WITNESSES

Name _____ Address _____ Phone _____
Name _____ Address _____ Phone _____

FIRST AID ADMINISTERED BY

EMS REPORT NO.

INJURED TAKEN BY

- 1- Ambulance, Private
- 2- Ambulance, Fire
- 3- Paramedics
- 4- Private Vehicle
- 5- Helicopter
- 6- Other

TIME: Amb. Called: _____ Arrived: _____

- 1- Policeman
- 2- Fireman
- 3- Ambulance Personnel
- 4- Paramedics
- 5- Doctor
- 6- Private Individual
- 7- Hospital
- 8- Helicopter Personnel
- 9- None Administered
- 0- Unknown

EMS REPORT NO.

INJURED TAKEN TO

JURISDICTION

Date Notified of Accident

Source of Information

Officer at scene _____
Driver No. _____ Contacted station _____
Other _____

PHOTO(S) TAKEN
YES ☐ NO ☐
VIDEO TAKEN
YES ☐ NO ☐
FIELD DIAGRAM
YES ☐ NO ☐

(USE MILITARY TIME)

Time Notified of Accident

Arrived at Scene

Investigation of accident

Completed at

of _____ at the same day _____ the _____ day following

WITNESSES

Name _____ Charge: _____

Name _____ Charge: _____

VSA Inspection: Yes _____ No _____ If Yes, Report Number _____

Other action taken _____

PRINT

OFFICER'S RANK AND NAME _____ I.D. NO. _____ PATROL DIVISION _____ DEPARTMENT _____ SUPERVISORS APPROVAL _____ DATE OF REPORT _____

State Law requires that report be forwarded to Dept. of Public Safety within 10 days following completion of the investigation. Mail ORIGINAL OF REPORT TO: Driver License Division Financial Responsibility.

LOCATION	TIME	MONTH	DAY	YEAR	DAY OF WEEK	1 2 3 4 5 6 7 M T W T F S S	MILITARY TIME	CASE NUMBER BEST AVAILABLE		15							
	PLACE WHERE ACCIDENT OCCURRED: COUNTY							CITY OR TOWN	FOR AGENCY USE		16						
	Accident was outside city limits indicate distance from city limits or nearest town							NORTH S E W MILES of CITY OR TOWN	D.L.D. USE ONLY		17						
	ROAD ON WHICH ACCIDENT OCCURRED:							RAMP NO.	STATE/LOCAL		18						
1	GIVE NAME OF STREET OR HIGHWAY NUMBER							INTERSECTION TYPE			19						
	1. AT ITS INTERSECTION WITH										20						
	2. IF NOT AT INTERSECTION										21						
	NEAREST INTERSECTION, STREET, HOUSE NO. LANDMARK BE SURE TO COMPLETE IF ROAD HAS MILE POST									22							
1	VEHICLE YEAR	MAKE	MODEL	BODY STYLE/TYPE CODE	VEHICLE COLOR	G.V.W.R.	DESC. OF CARGO CODE	COMMERCIAL VEHICLE (Reg 12,000 lbs. or more) INTERSTATE <input type="checkbox"/> INTRASTATE <input type="checkbox"/>		23							
1	VEHICLE IDENTIFICATION NUMBER				DISPOSITION OF VEHICLE CODE		NO. OF AXLES (INCLUDING ALL TRAILERS)		DIR OF TRAVEL	24							
1	US DOT	LICENSE PLATE INFO	YEAR	MONTH	STATE	NUMBER	PARTS DAMAGED	COST OF REPAIR		25							
2	OWNER	FIRST	INITIAL	LAST	STREET, CITY, STATE, ZIP, PHONE NO.				PHONE ()	26							
7	DRIVER	FIRST	INITIAL	LAST	STREET, CITY, STATE, ZIP, PHONE NO.				PHONE	27							
1	DRIVER'S LICENSE	STATE NUMBER			DATE OF BIRTH	MONTH	DAY	YEAR	AGE	SEX	SAFE EQUIP TYPE	INJURY CAUSE	AREA	EXTR CAUTION	EJECTION	THROUGH WHAT AREA EJECTED?	28
1	DRIVER'S EDUCATION	1. PUBLIC 3. NONE 2. COMFL 4. UNKN		YEARS DRIVE EXP.	LICENSE CLASS	ENDORSEMENT	RESTRICTIONS										29
3	INSURANCE COMPANY	EFFECTIVE DATE			EXPIRATION DATE			POLICY NUMBER								30	
3	INSURANCE APPEARS VALID		AGENCY THAT SOLD POLICY			ADDRESS			PHONE ()								31
1	VEHICLE YEAR	MAKE	MODEL	BODY STYLE/TYPE CODE	VEHICLE COLOR	G.V.W.R.	DESC. OF CARGO CODE	COMMERCIAL VEHICLE (Reg 12,000 lbs. or more) INTERSTATE <input type="checkbox"/> INTRASTATE <input type="checkbox"/>		NO. OF AXLES (INCLUDING ALL TRAILERS)		DIR OF TRAVEL				32	
1	VEHICLE IDENTIFICATION NUMBER				DISPOSITION OF VEHICLE CODE		PARTS DAMAGED		COST OF REPAIR						33		
1	US DOT	LICENSE PLATE INFO	YEAR	MONTH	STATE	NUMBER	PARTS DAMAGED	COST OF REPAIR						34			
10	OWNER	FIRST	INITIAL	LAST	STREET, CITY, STATE, ZIP, PHONE NO.				PHONE ()					35			
3	DRIVER	FIRST	INITIAL	LAST	STREET, CITY, STATE, ZIP, PHONE NO.				PHONE ()					36			
1	DRIVER'S LICENSE	STATE NUMBER			DATE OF BIRTH	MONTH	DAY	YEAR	AGE	SEX	SAFE EQUIP TYPE	INJURY CAUSE	AREA	EXTR CAUTION	EJECTION	THROUGH WHAT AREA EJECTED?	37
1	DRIVER'S EDUCATION	1. PUBLIC 3. NONE 2. COMFL 4. UNKN		YEARS DRIVE EXP.	LICENSE CLASS	ENDORSEMENT	RESTRICTIONS										38
1	INSURANCE COMPANY	EFFECTIVE DATE			EXPIRATION DATE			POLICY NUMBER								39	
1	INSURANCE APPEARS VALID		AGENCY THAT SOLD POLICY			ADDRESS			PHONE ()								40
1. PEDESTRIAN 2. BICYCLIST DATE OF BIRTH AGE SEX INJURY TYPE CAUSE AREA																	
NAME ADDRESS																	
OCCUPANTS																	

ORIGINAL REPORT

SUPPLEMENTAL REPORT

AMENDED REPORT

DIAGRAM WHAT HAPPENED BELOW.

CASE NUMBER

BEST AVAILABLE

Reason For No Diagram

1 Officer not at scene

Vehicles moved

3 Other

INDICATE DIRECTION OF NORTH



VEHICLE NO. 1 NO. 2

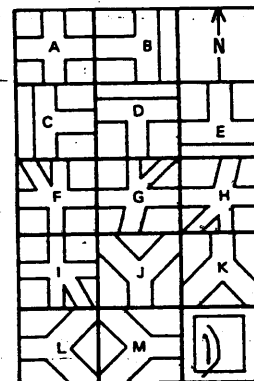
ESTIMATED TRAVEL SPEED

ESTIMATED IMPACT SPEED

POSTED SPEED

ADVISORY SPEED

5	20
5	20
—	—
—	—



INDICATE INTERSECTION TYPE

DESCRIBE WHAT HAPPENED (Refer to Vehicle by Number)

Vehicle #1 was turning left from the vehicle #1 made his turn between stopped vehicles on then made contact with vehicle #2. Vehicle #2 was heading east bound on in the right hand turn lane when it made contact with vehicle #1. Vehicle #2 was heading straight and then hit with #1 and then hit vehicle #3 that was parked northbound on

Driver of vehicle #1 stated he was turning left through stopped traffic when vehicle #2 hit him. Driver of vehicle #2 stated she was heading straight so that she could turn on the when vehicle #1 pulled in front of her.

If Hazardous Materials were involved list the placard number from off the commercial vehicle:

IMAGE TO PROPERTY OTHER THAN VEHICLES

Name object and state nature and amount of damage

ESTIMATE

Name and address of owner of object struck

WITNESSES

Name Address Phone Name Address Phone

FIRST AID ADMINISTERED BY

EMS REPORT NO.

INJURED TAKEN BY

- 1-Ambulance, Private
- 2-Ambulance, Fire
- 3-Paramedics
- 4-Private Vehicle
- 5-Helicopter
- 6-Other

TIME: Amb. Called:

Arrived:

- 1-Policeman
- 2-Fireman
- 3-Ambulance Personnel
- 4-Paramedics
- 5-Doctor
- 6-Private Individual
- 7-Hospital
- 8-Helicopter Personnel
- 9-None Administered
- 0-Unknown

EMS REPORT NO.

INJURED TAKEN TO

JULICE ACTIVITY

Date Notified of Accident Month Day Year Time Notified of Accident

Source of Information

Officer at scene Driver No. Other

PHOTO(S) TAKEN YES NO VIDEO TAKEN YES NO FIELD DIAGRAM YES NO

USE MILITARY TIME

Arrived at Scene Investigation of accident Completed at of the same day the day following

Name Charge Name Charge

VSA Inspection Yes No If Yes, Report Number

other action taken

PRINT OFFICER'S RANK AND NAME I.D. NO. PATROL DIVISION DEPARTMENT SUPERVISORS APPROVAL DATE OF REPORT

State Law requires that report be forwarded to Dept. of Public Safety within 10 days following completion of the investigation. Mail ORIGINAL OF REPORT TO: Driver License Division Financial Responsibility

DIAGRAM WHAT HAPPENED BELOW.

CASE NUMBER

BEST AVAILABLE

Reason For No Diagram

INDICATE DIRECTION OF NORTH

VEHICLE NO. 3 NO.



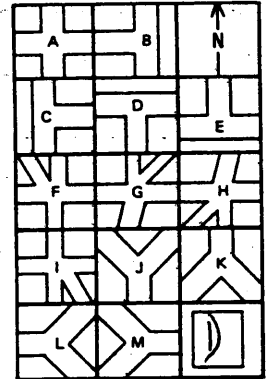
ESTIMATED TRAVEL SPEED

ESTIMATED IMPACT SPEED

POSTED SPEED

ADVISORY SPEED

0	
0	
-	
-	



INDICATE INTERSECTION TYPE

DESCRIBE WHAT HAPPENED
(Refer to Vehicle by Number)

Describe what happened below. Use vehicle numbers 1 through 3 to identify vehicles involved. If hazardous materials were involved, list the placard number from off the commercial vehicle.

If Hazardous Materials were involved list the placard number from off the commercial vehicle:

DAMAGE TO PROPERTY OTHER THAN VEHICLES
Name object and state nature and amount of damage
ESTIMATE

WITNESSES
Name Address Phone
Name Address Phone

FIRST AID ADMINISTERED BY
1 - Policeman 6 - Private Individual
2 - Fireman 7 - Hospital
3 - Ambulance Personnel 8 - Helicopter Personnel
4 - Paramedics 9 - None Administered
5 - Doctor 0 - Unknown
INJURED TAKEN BY
1 - Ambulance, Private
2 - Ambulance, Fire
3 - Paramedics
4 - Private Vehicle
5 - Helicopter
6 - Other
TIME: Amb. Called: Arrived:

POLICE ACTIVITY
Date Notified of Accident
Month Day Year
Time Notified of Accident
Arrived at Scene
Investigation of accident Completed at of the day following
Source of Information
Officer at scene
Driver No. Contacted station
Other
PHOTO(S) TAKEN YES ☒ NO ☐
VIDEO TAKEN YES ☐ NO ☒
FIELD DIAGRAM YES ☒ NO ☐

NAME OF PERSON ON WHICH
Name Charge
Name Charge
VSA Inspection Yes No If Yes, Report Number
Other action taken

PRINT
OFFICER'S RANK AND NAME I.D. NO. PATROL DIVISION DEPARTMENT SUPERVISORS APPROVAL DATE OF REPORT

State Law requires that report be forwarded to Dept. of Public Safety within 10 days following completion of the investigation. Mail ORIGINAL OF REPORT TO:
Driver License Division Financial Responsibility

BEST AVAILABLE

Incident Number		District Code		Unit Permit Number		Incident Number		Incident Date (MM/DD/YY)	
Incident Street Location			State		Zip Code		Location Code		Dispatch Code
Dispatch Date		Incident Reported Time		Dispatch Notified Time		Dispatched Time		Enroute Time	
Arrived At Scene Time		Arrived At Patient Time							
Left Scene Time		Arrived Destination Time		Back In Service Time		PM/EMT Number		EMT Number	
CPM/EMT Number		CPM/EMT Number		CPM/EMT Number		CPM/EMT Number		CPM/EMT Number	
Response / Transport		Bodily Fluids Exposure		CPR Information		Safety Equipment Usage		Alcohol/Drug Usage	
To Scene: <input checked="" type="checkbox"/> Lights / Siren <input type="checkbox"/> Silent Run		Exposure: <input type="checkbox"/> Yes <input type="checkbox"/> No		Was CPR initiated prior to EMS Arrival? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Safety equipment usage? (Seat belt, helmet, etc.) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Suspicion of alcohol/drug use? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
From Scene: <input type="checkbox"/> Lights / Siren <input checked="" type="checkbox"/> Silent Run		Types:		By Whom? <input checked="" type="checkbox"/> Citizen <input type="checkbox"/> 1st Responder		Types: <u>Seat belt</u>		Reason:	
								Odometer Readings	
								Beginning <u>487</u>	
								At Scene <u>497</u>	
								Ending <u>497</u>	
								Billable Miles <u>0</u>	
Patient Name		A. First		M.I.		Responsible Party		Telephone Number	
Street Address						Street Address			
City		State		Zip Code		City		State	
Telephone No.		Social Security Number		Race Code		Primary Insurance Number		Group Insurance Number	
Sex <u>M</u>		Date of Birth (MM/DD/YYYY)		Age <u>4</u>		Medicare Number		Medicaid Number	
Chief Complaint		<u>Head Injuries</u>		Current Medications		<u>unk</u>			
Past Medical History		<u>unk</u>		Allergies		<u>unk</u>			
Narrative									
<p><u>Pt restrained with lap belt only in frontal impact @ ~40 MPH</u> <u>deployed air bag. Pt removed from car by bystanders. Out on roadside</u> <u>on our arrival & vitals resp being performed. Pt unconscious/unresponsive.</u> <u>deceased. decontaminate, decontaminated. Pt had (R) eye swelling & bloody</u> <u>serous. Pt would withdraw (R) ILL after p.</u></p>									
REVISED TRAUMA SCORE		GLASGOW COMA Score		Vitals		Time		Pulse	
RESPIRATORY RATE		CODES		Initial		50		unable	
NUMBER OF RESPIRATIONS IN 15 SECONDS MULTIPLY BY 4		1-10 2-3 4-5 6-7 8-9 10-15 16-20 21-25 26-30 31-35 36-40 41-45 46-50 51-55 56-60 61-65 66-70 71-75 76-80 81-85 86-90 91-95 96-100 101-105 106-110 111-115 116-120 121-125 126-130 131-135 136-140 141-145 146-150 151-155 156-160 161-165 166-170 171-175 176-180 181-185 186-190 191-195 196-200 201-205 206-210 211-215 216-220 221-225 226-230 231-235 236-240 241-245 246-250 251-255 256-260 261-265 266-270 271-275 276-280 281-285 286-290 291-295 296-300 301-305 306-310 311-315 316-320 321-325 326-330 331-335 336-340 341-345 346-350 351-355 356-360 361-365 366-370 371-375 376-380 381-385 386-390 391-395 396-400 401-405 406-410 411-415 416-420 421-425 426-430 431-435 436-440 441-445 446-450 451-455 456-460 461-465 466-470 471-475 476-480 481-485 486-490 491-495 496-500 501-505 506-510 511-515 516-520 521-525 526-530 531-535 536-540 541-545 546-550 551-555 556-560 561-565 566-570 571-575 576-580 581-585 586-590 591-595 596-600 601-605 606-610 611-615 616-620 621-625 626-630 631-635 636-640 641-645 646-650 651-655 656-660 661-665 666-670 671-675 676-680 681-685 686-690 691-695 696-700 701-705 706-710 711-715 716-720 721-725 726-730 731-735 736-740 741-745 746-750 751-755 756-760 761-765 766-770 771-775 776-780 781-785 786-790 791-795 796-800 801-805 806-810 811-815 816-820 821-825 826-830 831-835 836-840 841-845 846-850 851-855 856-860 861-865 866-870 871-875 876-880 881-885 886-890 891-895 896-900 901-905 906-910 911-915 916-920 921-925 926-930 931-935 936-940 941-945 946-950 951-955 956-960 961-965 966-970 971-975 976-980 981-985 986-990 991-995 996-1000 1001-1005 1006-1010 1011-1015 1016-1020 1021-1025 1026-1030 1031-1035 1036-1040 1041-1045 1046-1050 1051-1055 1056-1060 1061-1065 1066-1070 1071-1075 1076-1080 1081-1085 1086-1090 1091-1095 1096-1100 1101-1105 1106-1110 1111-1115 1116-1120 1121-1125 1126-1130 1131-1135 1136-1140 1141-1145 1146-1150 1151-1155 1156-1160 1161-1165 1166-1170 1171-1175 1176-1180 1181-1185 1186-1190 1191-1195 1196-1200 1201-1205 1206-1210 1211-1215 1216-1220 1221-1225 1226-1230 1231-1235 1236-1240 1241-1245 1246-1250 1251-1255 1256-1260 1261-1265 1266-1270 1271-1275 1276-1280 1281-1285 1286-1290 1291-1295 1296-1300 1301-1305 1306-1310 1311-1315 1316-1320 1321-1325 1326-1330 1331-1335 1336-1340 1341-1345 1346-1350 1351-1355 1356-1360 1361-1365 1366-1370 1371-1375 1376-1380 1381-1385 1386-1390 1391-1395 1396-1400 1401-1405 1406-1410 1411-1415 1416-1420 1421-1425 1426-1430 1431-1435 1436-1440 1441-1445 1446-1450 1451-1455 1456-1460 1461-1465 1466-1470 1471-1475 1476-1480 1481-1485 1486-1490 1491-1495 1496-1500 1501-1505 1506-1510 1511-1515 1516-1520 1521-1525 1526-1530 1531-1535 1536-1540 1541-1545 1546-1550 1551-1555 1556-1560 1561-1565 1566-1570 1571-1575 1576-1580 1581-1585 1586-1590 1591-1595 1596-1600 1601-1605 1606-1610 1611-1615 1616-1620 1621-1625 1626-1630 1631-1635 1636-1640 1641-1645 1646-1650 1651-1655 1656-1660 1661-1665 1666-1670 1671-1675 1676-1680 1681-1685 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Re: 1995 Pontiac Grand Prix
VIN:

Dear

This letter is in response to your request that GM provide information about the data stored in the Sensing Diagnostic Module (SDM) of the subject vehicle.

On _____ printed the data stored by the SDM in the subject vehicle. The SDM is the electrical component of the Supplemental Inflatable Restraint (SIR) system that functions to diagnose and record SIR information. The following information was determined through analysis and interpretation of the SDM data.

* The SDM recorded and stored a CRASH EVENT which contains the following information:

- The SIR Warning Light was OFF at the time of the deployment.
(no malfunctions)
- The SIR Warning Light was not ON prior to the accident.
(no malfunctions)
- There were three SIR system codes stored in memory.
(these codes are associated with a normal air bag deployment event)
- The air bags deployed 38.75 milliseconds after the collision was first detected by the SDM.
- The maximum change in velocity (Delta V) the SDM recorded was 13.27 mph.
- The accident occurred on ignition cycle number 3748. This is eleven (11) cycles prior to when the SDM was read on (3759).
- This was the first Deployment Crash Event for this vehicle.
- The drivers seat belt was latched at the time the deployment occurred.

Please do not hesitate to contact me if you have any questions.